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Substitute for form 1449/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT

Complete if Known **Application Number** 10/612,830 **Filing Date** June 30, 2003 First Named Inventor Herrmann, Volker Art Unit Unassigned **Examiner Name** Unassigned 15283A-002300US Attorney Docket Number

(use as many sheets as necessary)

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MARTE	U.S. PATENT DOCUMENTS+								
N		Document Number							
Examiner Initials*	Cite No. <sup>1</sup>	Number Kind Code <sup>2</sup> (# known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear				
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Examiner Initials*	Cite No.1	Foreign Patent Document				Name of Patentee or	Pages, Columns, Lines,	
		Country Code <sup>3</sup>	Number <sup>4</sup>	Kind Code <sup>4</sup> (if known)	Publication Date MM-DD-YYYY	Applicant of Cited  Document	Where Relevant Passages or Relevant Figures Appear	T <sup>0</sup>
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Examiner Signature		Level V	MANDE	Date Considered	8/12/04	
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